

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

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Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements.

The time limit for correction of each violation is specified in the narrative portion of this report.

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Establishment Name				Telephone Number	Date of Inspection PERMIT # (mm/dd/yr)	
Timpi Sub Ship IIC, DBA Submay				812 544 6523	9/27/2019 19-328	
Establishment Address (number and street, city, state, zip code)				(10 000 0100	19/2//2019 111-328	
2910 Grantlin Rd. New Alberg, IN 47150				U10 505 0433		
Prakash Kraw Paki				Purpose: Routine	Follow-up Release Date TODAY	
Owner's Address				2. Follow-up	Summary of Violations:	
				3. Complaint		
Person in Charge Nick Pale				4. Pre-Operational	C I NC Z R	
Responsible Person's E-mail				5. Temporary	Menu Type (See back of page)	
			· · · · · · · · · · · · · · · · · · ·	6. HACCP		
Certified Food Manager				7. Other (list)	1 2 × 3 4 5	
Nick Yahl 7/3/23					<u> </u>	
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"						
• VIOĽATIO	ON(S) REPEA	TED FI	ROM PREVIOUS INSPECTIONS ARE DENOTED IN THE	"SUMMARY OF VIOLATIONS" A	ND IN THE NARRATIVE BELOW AS "R"	
Section#	C/NC	R	Narrative		To Be Corrected By	
438	((Today	
-	† <u>-</u>		Observed unlabeled churical appr	1 Die E	1,39,	
342	~/c	/	" casure purp lim handsink a	* 81 /	/ week	
	342 NC Messard gays line handsink at 81° F / week - must reach ICe' F / 20 seconds minimum 466 NC Observed dead longs in BOH light shields / week					
416	ML	0	bsend dead longs in BOH	light shells	/ neck	
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Received by (name and title printed): Inspected by (name and title printed):						
NICK A.). Ingram (EHS)						
Received by	y (signature)	; 		Inspected by (signature):	,	
	Y	\leq			<u> </u>	
cc:	 		ce:		ce;	